Who Wins, Who Loses, Who Cares:

What Do We Know About Who Participates and Who Does Not Participate In Health Protection and Promotion?



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STEPS to a Healthier US Workforce Symposium Dennis Richling, M.D.

- Introduction
- Winners and Losers?
- Who Care? Employers
- A Reformation Process



What is MBGH?

- Nearly 70 self-funded, public and private employers employers working together
 - to improve the quality and cost-effectiveness of health care
 - Nearly 25 years old
 - Headquartered in Chicago
 - over 850,000 workers and spend over \$2.5 billion on health care.
- One of 90 coalitions in U.S.
 - Employers organized in regions
 - Over 12,000 employers covering 21.6 million lives

Who Wins, Who Loses?

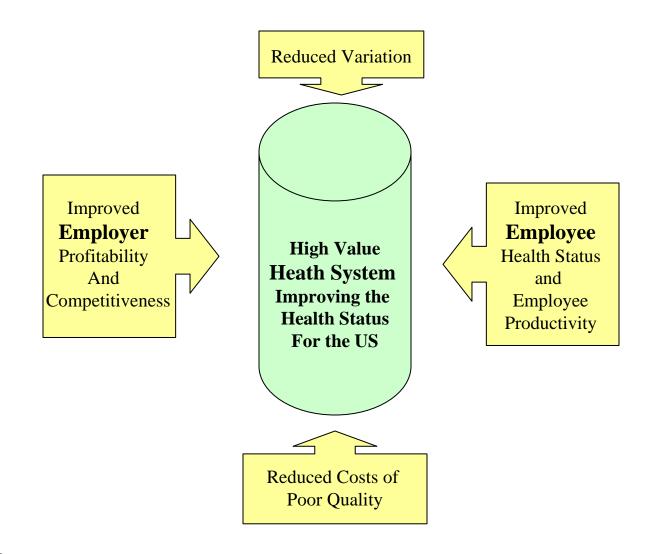


The Zero-Sum Game



and Losers

It Is About Creating More Value





If only our current silos were benign.



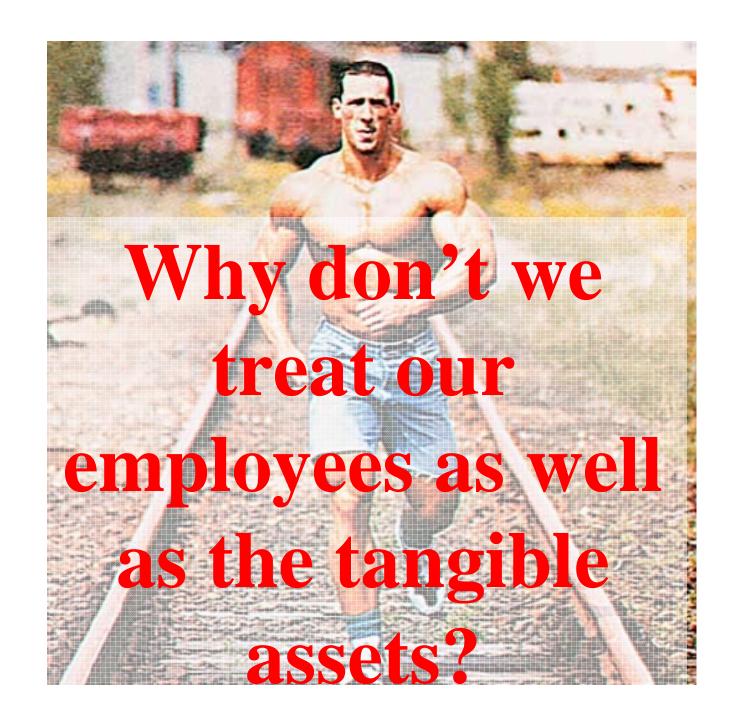


Who Cares?

A Business Solution for a Business Problem

The Case for Human Capital Management





The Business Problem: Human Capital Costs

- H ts
 - ctiv
 - -Absent n
 - -Presenteers
- Safety
 - -Critical Incidences



Direct Health Costs

The cost of poor quality

MBGH-Juran Institute study found 30% of health benefits dollars

- \$390 billion a year spent on waste*
- Over \$2000 per employee

Health care quality problems are:

- Widespread
- Often invisible to consumers and purchasers
- Costly
- Purchasers bear responsibility by paying for poor care
- Specific steps to improve quality and reduce costs



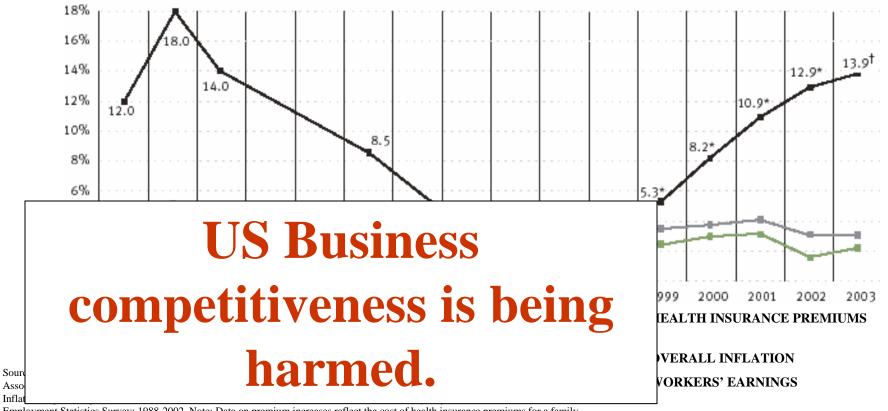
What is Health Care Quality?

- Individual Health Status
- Highest Level of function
- Efficiency
- Population Health Status

Health Costs, Low Economic Growth

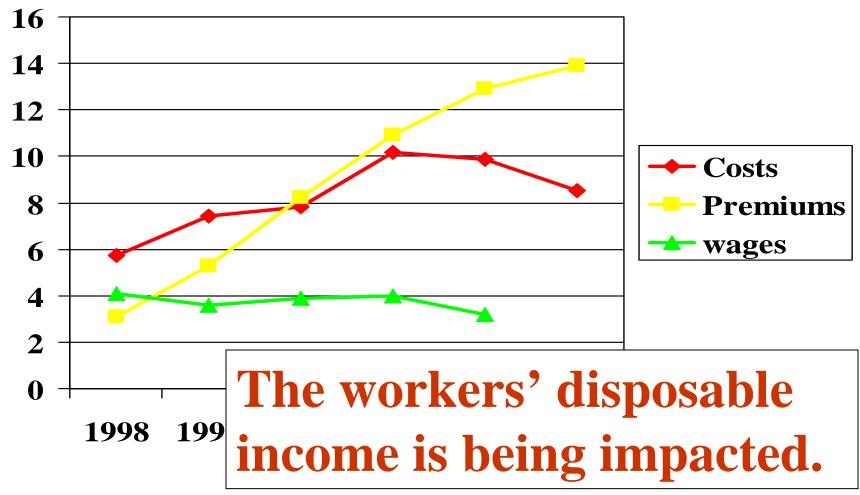
Hurt US Competitiveness

Health Insurance Premiums Compared to Other Indicators.



Employment Statistics Survey: 1988-2002. Note: Data on premium increases reflect the cost of health insurance premiums for a family of four.

Health Costs Relative to Wages



Source: KFF Employer Survey, premium data; Strunk and Ginsburg, cost data; 2003 EROP, wage data.

Union Pacific HERO - ME

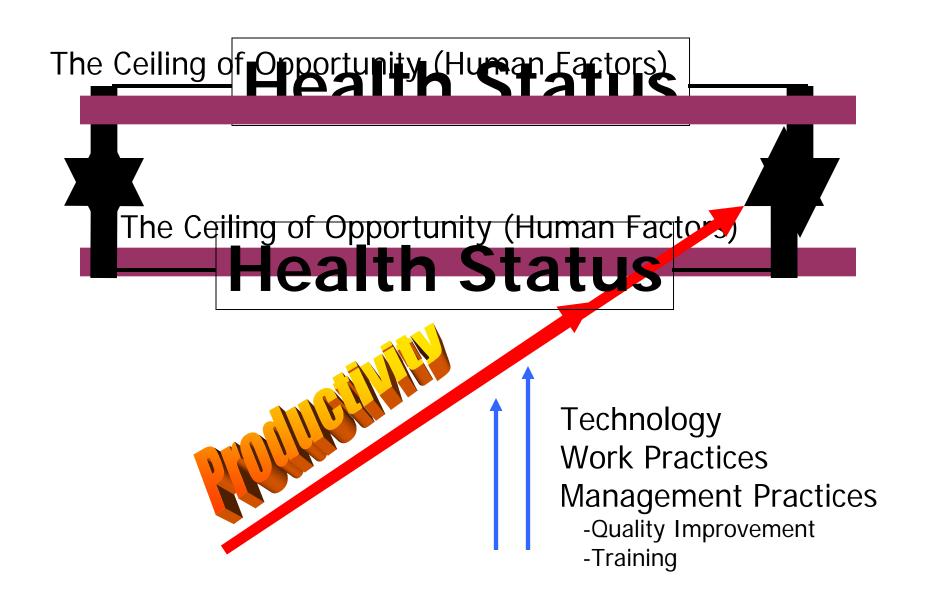
Potential Cost Avoidance

| Table 5 Projected Costs for Four Different Program Scenarios | | | | |
|--|------------|-------|------------|------------|
| | Scenario 1 | ario2 | Scenario 3 | Scenario 4 |
| 1998 costs (in millions) | 381.9 | 381.9 | 381.9 | 381.9 |
| Projected Cost Increase (2008, in \$M) | 99.6 | 88.5 | 78.9 | 22.2 |
| Total 2008 Costs | 481.5 | 470.4 | 460.8 | 404.1 |
| Percent increase from 1998 to 2009 | | | | |
| | 26.1% | 23.2% | 20.7% | 5.8% |

\$77.4M Opportunity

UP is predicted to have a 2.6% annual increase in lifestyle related claims cost

Productivity

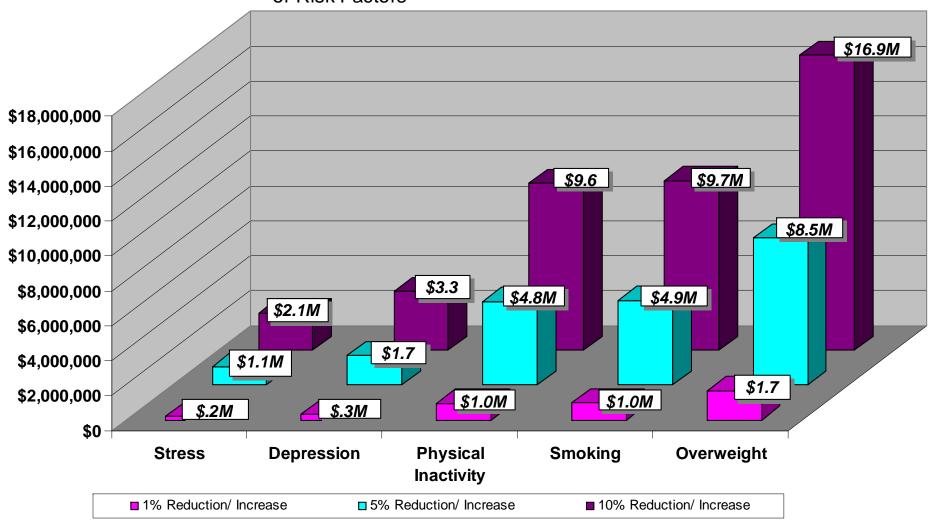


Safety

Health and Safety

- Most significant predictors of injury besides age and tenure are:
 - health status
 - tobacco use
 - stress
 - weight
- Weight was significant for the 45+ years age group

Differences Between 1%, 5%, and 10% Reduction/Increase of Risk Factors



UPRR Safety Costs Related to Health Risks

The Opportunity

Health Promotion and Health Protection

- Requires a Comprehensive Approach
 - Programs
 - Environment
 - Culture
- Similar Approaches
 - Application of Social and Behavioral Science
 - Targeted population

Evolution of Occupational Medicine

Transition to Corporate Health

Industrial Medicine

Occupational Medicine

Occupational Health

Corporate Health

- Urgent care focus
- Efficient followup
- Physical exams
- Workers' Comp.
- Industrial hygiene
- services

- Examinations (pre-placement, medical surveillance)
- Hazard communication, toxic exposures
- Hearing conservation
- OSHA/NIOSH/EPA/ ADA regulatory compliance

- Wellness/health promotion
- Ergonomics
- Case management
- Disability management
- Individual and organizational health assessment

Integration of:

- Health management
- Disease management
- Absence management
- Pharmaceutical management
- Health care quality/cost management
- Chief health officer managing the health assets and human capital of the workforce

Source: Presentation of Pamela Hymel, M.D., MBGH 2004 Annual Conference From Ron Loeppke, M.D.

The Opportunity for the Occupational Health Professional

- Occupational medicine professionals are trained in population health management
- Occupational injury management expertise, transferable to non-work related arena
- Skills to analyze data to identify trends and target highest-impact interventions
- Understand the issues of the employee and employer
- Experts in the interaction of the work environment and the employee
- Provide valued services to employers that can be leveraged for access on broader issues

A relationship built on trust

Why Manage Human Capital? Maximize the profitability of the organization!

- Health costs, Productivity and Safety re important issues
- Employee information to employ
- Employers are influencing the book and safety of the workform
- Employ have the health marketplace

Many times in unintended ways.

Employers are not willing to wait for disaster to result...

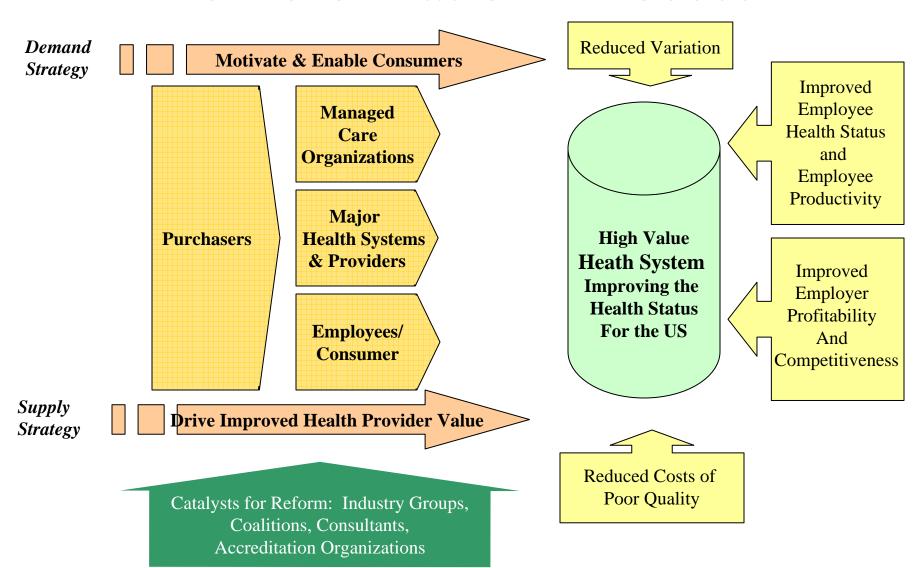
They intend to drive a reformation

What Do We Know About Who Participates and Who Does Not Participate In Health Protection and Promotion?

Employers Championing the Reformation of the Health System



"The Reformation" Process



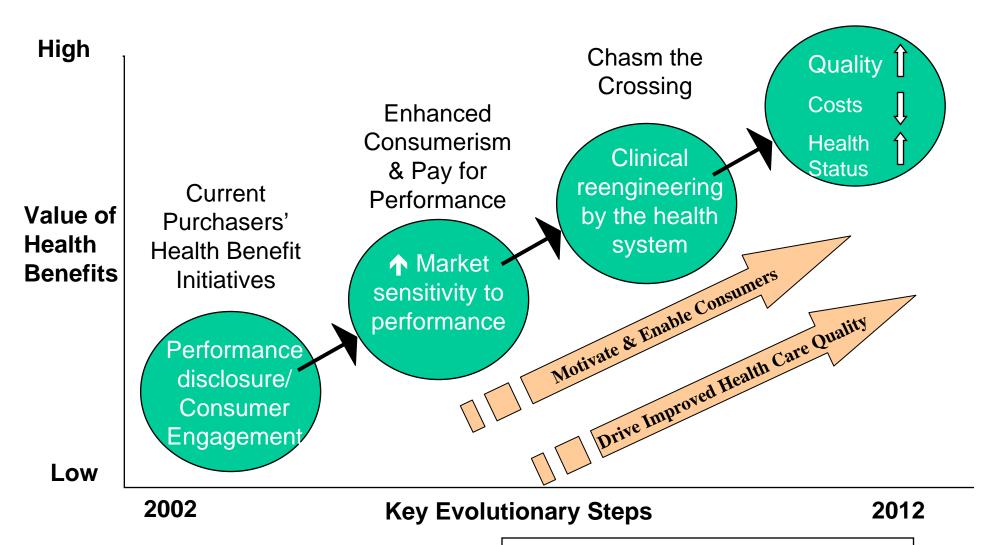


- 1. Provider Selection Decisions
 - 1. Consumer-Directed Health Plans
 - 2. Decision Support Tools
 - 3. The Data Transparency Movement
- 2. Personal Health Decisions
 - 1. Disease Management
 - 2. Health Promotion
 - 3. Medical Self-Care

Drive Improved Health Provider Value

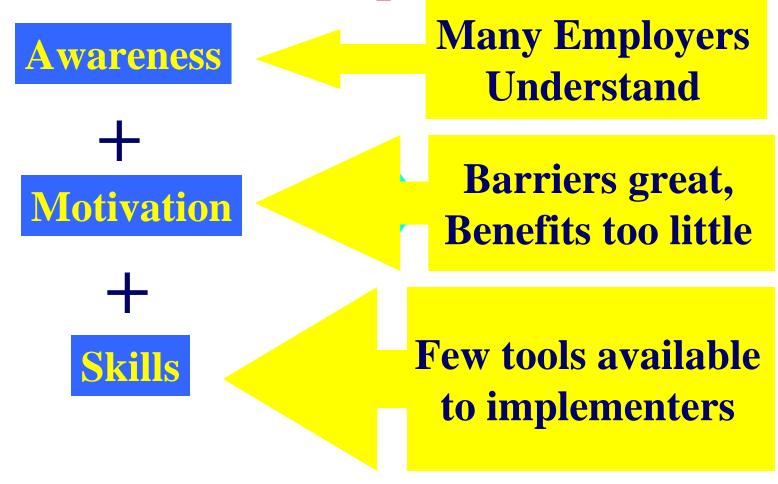
- Responsible Purchasing
 - Benefit design
 - Value-based purchasing
 - Total cost of health
- Community Projects
 - Pay for Performance
 - Data Collection
- National Employer Initiatives
 - Defining quality Leapfrog

The Critical Pathway The High-Value Health System



Source: Adopted from the Disclosure Project

What needs to be accomplished to activate employers?



The barriers to managing Human Capital?

- Employers should get out of health care
- Not core business
- Risk avoidance
- Limited expertise in strategies
- Limited ability to predict impact with rationed resources
- Traditional sources of health management advice are not offering comprehensive integrated solutions

The Win-Win

- Health is not a zero-sum game
- The silos of Health Management must be broken down
- Value can be created for all
- Improved US health status is a win-win

For further information

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Presentation available at www.mbgh.org